**EVENT NAME**

DATE | START & FINISH TIME

**REQUESTOR TO COMPLETE ALL SECTIONS- minimum 2 weeks prior to the event**

**EVENT DETAIL**

|  |  |
| --- | --- |
| **LOCATION**  |  |
| **START DATE** |  | **END DATE** |  |
| **START TIME** |  | **FINISH TIME** |  |
| **BUMP IN TIME** |  | **BUMP OUT TIME** |  |
| **EXPECTED NUMBER OF ATTENDEES** |  | **ARE ANY EXTERNAL/ STAKEHOLDERS PRESENTING OR ATTENDING?** | [ ] Yes (attach list)[ ] No  |
| **KEY STAFF CONTACTS** |  |
| **BUDGET:** * Account code
* Event budget
 | 01.\_\_\_.\_\_\_\_\_$  |

**SUPPORT REQUESTED**

|  |  |
| --- | --- |
|  | **OFFICE USE ONLY:** |
| **TASK:** | **NOTES/DETAILS:** | **ACTION/****ASSIGNED TO:** | **STATUS/ UPDATE**  | **Date last updated:** |
| **Calendar invitation** | *If requestor requires Ops Team to generate calendar invitation, please provide wording for invitation here:* |  |  |  |
| **Additional information**  | *Please attach the following:*[ ] Invitee list & email addresses[ ] Agenda[ ] Map[ ] Any other supporting documents |  |  |  |
| **Venue** | *Please include details of preferred location and/or confirmation of booking* |  |  |  |
| **Format, AV support & equipment** | **Format:**[ ] In person[ ] MS Teams[ ] Livestream[ ] Collaborate[ ] Zoom (note: Zoom is not supported by IDS)**Other requirements:**[ ]  Recording (must include ‘THIS EVENT IS BEING RECORDED’ in Topic Line of booking as per P&C advice)[ ] In-person audio visual team support during the event. **Equipment required:** [ ] Clicker/laser pointer[ ] Hand-held microphone (number) \_\_\_[ ] Lectern PC[ ] Laptop (BYO Device)[ ] Online Presentation[ ] Whiteboard & markers[ ] Butcher Paper & markers[ ] Pull Up Banners (detail type)[ ] BGL logo (gold background)[ ] Program specific: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_[ ] Name Tags (attach list of attendees)[ ] Name Plates (names & org/title)[ ] Other (include detail) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |  |  |  |
| **Catering:*** **Food**
* **Beverages**

Request for dietary requirements will be included in the calendar invitation. Responsibility of recipients to advise needs.Support will be adjusted to meet COVID-19 requirements as required. | **Food: type required**[ ] Morning Tea[ ] Lunch[ ] Afternoon Tea[ ] Other (add detail here \_\_\_ )**Beverages:** [ ] Tea/Coffee self-serve station[ ] Coffee Tab (requires approval of DoCS if charging to College Operations account, otherwise the appropriate delegate for Teaching/Research Section budget – attach email approval). [ ] Bottled water [ ] Other (add detail here \_\_\_ )[ ] Alcohol - note: minimum 2 weeks’ notice and attach [Application to provide alcohol on University Premises form](https://staff.flinders.edu.au/content/dam/staff/governance/liquor-permit.pdf) [ ] If Operations support requested for catering service, provide detail here \_\_\_) |  |  |  |
| **On the day support from the Ops Team**  | **Assistance required:**[ ] Registration desk[ ] Room set up[ ] Pack down[ ] Other (\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_)\*note, requests for on the day event support will be reviewed by the CBGL Executive Officer. **On the day support is not guaranteed** but will be provided where possible.  |  |  |  |
| **Guest Car Parking:** | **Permit details:**Driver name:Registration plate number:State of registration:\*note, Ops team will process permit requests and charge to nominated account code for event. |  |  |  |
| **Guest/Speaker Gifts:** |  |  |  |  |
| **Additional Notes/special requests:** |  |  |  |  |
|  |  |  |  |  |

Submit completed application to: cbgl.operations@flinders.edu.au

**Approval:** [ ]  Executive Officer [ ]  College Manager

Notes:

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